

P.O. BOX



Update on the Happenings of HCFA's Managed Care Systems and Support Operations

Health Plan Payment and Operations Support, CHPP - Health Care Financing Administration

HCFA TO PROCESS

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PAYMENTS FOR IMMUNO-SUPPRESSIVE DRUGS

A memorandum to Medicare + Choice Organizations (M+COs) was released that contains instructions on how to request payment for certain immunosuppressive drugs.

The Balanced Budget Refinement Act (BBRA) extended Medicare benefits for immunosuppressive drugs following organ transplant from 36 to 44 months. Effective January 1, 2000, for beneficiaries whose coverage would expire

during 2000, Medicare will cover these drugs for an additional 8 months in 2000, for a total of 44 months.

M+COs should request payment if:

-the member had an organ transplant,

-the 36-month period after the organ transplant expires during CY 2000 and

-immunosuppressive drugs are provided during CY 2000 for the period of 37 – 44 months after the organ transplant.

M+COs should request payment for these drugs via HCFA's Health Plan Management System (HPMS). A spreadsheet that can be downloaded, completed and uploaded to the Immunosuppressive Drugs Claim Processing module in HPMS, is provided for this purpose.

The memorandum specifies reporting periods and dates when payments will be processed. All payment requests must be received by April 2, 2001 to be considered.

The Immunosuppressive Drug Claims Processing module in HPMS is operational for data submittal.



REORGANIZING TO SERVE YOU BETTER

The Health Plan Payment and Operations Support Branch (HPPOS) has restructured its staff into regionally assigned work teams. These teams replace the Plan Communications Desk and the Managed Care Action Desk. All calls normally made to these desks should now be placed to an appropriate team member for your area. Each team is assigned to one of the HCFA regional offices and the managed care organizations within that region's geographic area of responsibility.

Our staff will be fully trained in all areas of responsibility and training has been underway. We are hopeful our new arrangement will provide you with better support for all of your issues. Please see the staff assignments at the end of this

issue of the *P.O. Box*. During this transition, feel free to provide us with any comments, suggestions or concerns that you may have about our new work structure!



To insure that the impact of the host site realignment was minimized, Great Western

Host notified all M+COs of the change. This information is reaffirming the Great Western notification.

COMMON WORKING FILE HOST SITE REALIGNMENT

Effective September 4th, 2000 the Common Working File (CWF) Pacific Host Site, California, is no longer in the Medicare program. Therefore, effective the same date, the Great Western Host Site, Oregon, will be the site where data from Pacific Host will be located.

How does this CWF host site realignment effect you? The changes will be minimal. First, the beneficiary information database that was located in the Pacific Host will now be located at the Great Western Host. Secondly, this change will effect how the Medicare + Choice Organizations (M+CO) access the data. M+COs that now access CWF data through the Pacific Host, HCFA Data Center (HDC) Product Number 7, will now have to use HDC Product Number 65. Due to this change, product number 7 is no longer active.

However, should you have any questions regarding this host site change, please call Gloria Webster on (410) - 786-7655, James Dorsey on (410) - 786-1143, or Richard Wolfsheimer on (410) - 786-6160.

1999 HOSPICE RATE RECONCILIATION IN PROCESS

During March – May of 2000, Medicare+Choice organizations (M+COs) participated in a reconciliation activity. The goal was to determine if money was owed to M+COs due to the inability of HCFA's systems to process more than 1 hospice rate for each contract number. This systems limitation caused all hospice members to be paid at the same rate even if the M+CO offered more than one benefit plan (and more than one hospice rate).

M+COs have provided hospice membership information to HCFA and this data is being processed. Some discrepancies have been identified; however, which are causing delays in completing this reconciliation.

Upon completion of the resolution of these discrepancies, M+COs will see evidence of any payments on the Plan Payment Report, under the CHPP Adjustment section. They will be noted "CY 1999 Hospice Reconciliation".

PAYMENT WILL OCCUR IF:

the M+CO's numbers of hospice members are less than or equal to HCFA's, the computed reconciliation payment amount is positive and the HPMS and managed care system hospice rates agree.

M+COs that reported far more hospice members than HCFA or that had discrepant HPMS/managed care system hospice rate information are being researched. Payments, if applicable, to these M+COs will be delayed.

Updates to the status of the CY 1999 hospice reconciliation will be



reported on the managed care system web page and in subsequent issues of the P.O. Box.

OODLES OF DISCOVERIES

CONTACT INFORMATION IN PICS

The Plan Information Control System (PICS) contains all contract and plan information that was gathered during the contract application process. This information includes the title, names, addresses, telephone/fax numbers, etc. for each of the officials/contact persons within the Managed Care Organization. The information is used to mail reports, letters and other information to the appropriate contact personnel.

Managed Care Organizations are required to update their plan contact and address information in PICS. Keeping the information in PICS up-to-date will insure that important information is sent to the appropriate person and address. It is important to review this information as well as the banking information, to assure accuracy.

FOLLOW UP: WORKING AGED UPDATES FROM THE CWF

As promised, beginning in July 2000, we have been receiving the Medicare Secondary Payer (MSP) downloads from the Common working file (CWF) host sites the first weekend of the month – we used to receive the files the second weekend. What this means to your M+C organization is that working aged updates will be processed timely to meet the Group Health Plan (GHP) monthly run cycle. This will allow the GHP system to process Working aged activity in the month it is received. On extreme occasions, it may not be possible for us to receive timely updates from the CWF. When this happens, we will notify you in advance.

NEW: "WORKING AGED TRANSACTION STATUS REPORT"

A new report to track plan submitted working aged transactions will be placed into our monthly production effective November 2000. A letter to Managed Care Organization will be released soon, which mentions the specifics of this new monthly report.

HPPOS REGIONAL ASSIGNMENTS (attachment)

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